

Alfreton  
Urban District Council.

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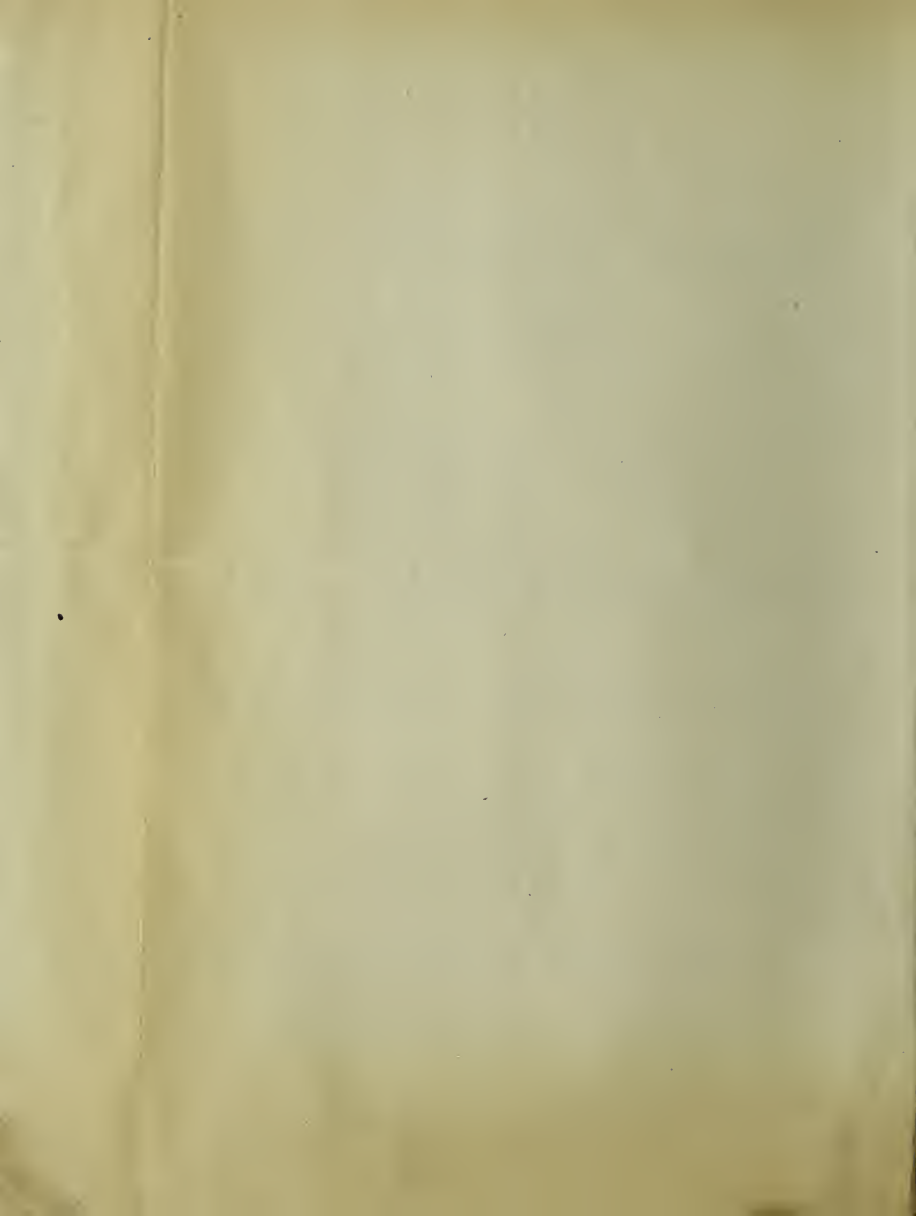
DR. GAYLOR'S  
30th ANNUAL REPORT,

From January 1st, to December 31st, 1902.

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TO WHICH IS ADDED, THE  
Report of the Inspector of Nuisances  
(Mr. SPENCER.)

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# ALFRETON URBAN DISTRICT COUNCIL.

## DR. GAYLOR'S 30TH ANNUAL REPORT, For 1902.

From January 1st, 1902, to December 31st, 1902.

### TO THE ALFRETON URBAN DISTRICT COUNCIL.

GENTLEMEN,

This Report will be found to be, on the whole, very satisfactory. It will show that both the years 1901 and 1902 are distinguished for having a very low rate of mortality.

The year 1902, dealt with in this report, shows the smallest death rate for the last eleven years, of which Table I. shows the record.

I have so often referred to the very large number of deaths under the age of five years, and especially the deaths during the first year of life, that I can add nothing but an expression of regret that the mortality at these respective ages always swells the death rate of the district to large proportions, as compared to what may be looked upon as an ordinary or natural death rate.

For this year 1902 no less than 48 per cent. (nearly 49 really) of the whole number of deaths from all causes were those of children under five years of age.

The total number of deaths is 233, and out of this no less than 114 were those of children.

This is one element which spoils the gratification which naturally arises from the general survey of the general mortality of the district.

If we take the number of Notifications of Infectious Diseases for each year since the Council adopted the Act, which was at that time a "permissive Act," but which has since become compulsory, we find that the year 1902 shows a very large reduction in the numbers notified:

1892 ..	114	1898 ..	118
1893 ..	84	1899 ..	147
1894 ..	81	1900 ..	221
1895 ..	452	1901 ..	107
1896 ..	314	1902 ..	45
1897 ..	90		

We have always had a very large number of Scarlet Fever cases, and for some years it used to be said that Alferton District was never free from Scarlet Fever.

In 1901, when we had a comparatively small number, there were 76 cases; but this year, 1902, there have been only 19 cases during the whole year, and no deaths have been registered as from Scarlet Fever.

We have, unfortunately, had an epidemic of Measles in some parts of the district, with 11 deaths registered from that disease.

As we go on, we shall see that even with this Measles outbreak the death rate from what are considered preventable diseases is only .73 per 1,000, while the death rate from the same class of diseases in England and Wales is for the year 1902 1.64 per 1000.

It is somewhat singular, but we had the same number of deaths from Measles in 1901, and in addition we had 15 deaths from Whooping Cough.

Both these diseases are outside the class of "preventable" diseases, and we can do very little by way of sanitary regulations, except by taking measures to prevent the sufferers from mixing up with the other children—and this is where closing of schools seems to be the only way to deal with them.

Isolation in Measles or Whooping Cough Epidemic cannot be carried out except among the specially favoured portion of the community.

The Zymotic Death Rate in 1901 was 2.09 per 1,000. In 1902 it is .73 per 1,000.

### SMALL POX.

Whatever opinions may be indulged in as to the prevention, or otherwise, of this foul disease, there can be no two opinions about its terrible character, and its great cost.

Just now, it has been officially stated that the epidemic of Small Pox in the Metropolis has cost the very large sum of four hundred and ninetyone thousand pounds, or, say, in round numbers, a half-million of money. Add to all this expenditure the interference with trade, the disfigurement of the human form, the blindness, the deafness, and many other remnants of mischief which it left behind it, and we must feel appalled at its dreadful character and its terrible havoc.

Everybody knows my opinions of the efficacy of vaccination, as I have lived long enough to have seen its great benefits, and in my younger days in the Eastern Counties saw an epidemic of Small Pox in three different villages, and personally vaccinated in one day no less than 121 children in those villages, besides revaccinating adults, with the result that Small Pox was actually killed and vaccination acted as a charm.

There has been no case of Small Pox in your district during the year, though cases have occurred at several places around you, and I am one of those who believe that the vaccinated portion of your inhabitants have in a sense protected you from a visitation of that disease.

I have no means of ascertaining how many persons have been vaccinated during the last two years, but I do know of many cases of revaccination, and very many persons who had business in London and other large towns made it in their way to get revaccinated before they ventured upon their business journey to those various infected towns.

We do know that Sodom and Gomorrah would not have been destroyed if there had been only a few good people in it, and just in the same way I believe the vaccinated portion of the population do really and actually protect, in a measure, those who conscientiously dispute its efficacy, by preventing its visitation, because the facilities for its propagation are very much contracted.

There are now Small Pox Hospitals in many parts of the country, erected and managed at great expense, and I thoroughly believe we should want nothing of the kind if everybody was vaccinated and revaccinated.

I haven't a word to say against Public Vaccinators, but I am of opinion that every qualified Medical Practitioner should be a Public Vaccinator, and the charges for vaccination should be an Imperial charge and come out of the Imperial funds. Of course there would be the same Government Inspection as there is now, in order to guarantee efficient vaccination.

I will conclude this part of my report with the following reply, which the President of the Local Government Board gave to the deputation that waited upon him with reference to the renewal, or otherwise, of the Vaccination Act, which expires at the end of this year 1903.

"They had," he said, "at the Local Government Board a constant and growing experience of the advantages of vaccination, and the only wonder they felt, was, that it was necessary at this period of the world's history for a great deputation like that to come there in order to support that which they in office believed ought to receive the unqualified support of every intelligent person."

He had no desire to be, or say, anything offensive to those who did not believe in Vaccination, but he felt bound to say that the more he had studied the question the more difficult he had found it to be, to understand how anyone could fail to give a hearty support to one of the greatest instruments of preventive medicines in the world.

I have written the above as a Medical Officer of Health, in order to say a few words of advocacy of a measure which, I believe, is a preventive against one of the most terrible diseases which affects mankind, and which now threatens to become epidemic throughout the country.

If Small Pox ever became epidemic, as some other diseases are, Small Pox Hospitals would be absolutely useless, as they could neither be constructed in sufficient numbers nor of sufficient area, to say nothing of the immense cost.

### SCARLET FEVER.

There have been 19 cases of this disease notified during 1902.

As before stated, this is the least number we have had to contend with for at least eleven years.

There have been no deaths from the disease, and I am inclined to the opinion that the type of the disease which we have to deal with in these days is much milder in its effects and consequences than it used to be.

Its general fatality used to be something like 10 per cent.; at this moment it is about 2 per cent. Of course the same care of the patient is necessary, as the after effects of a neglected case, even in these days, is very serious, and clings to the unfortunate sufferer throughout a shortened life.

There can be no doubt sanitation has had a considerable influence on the disease. It does not find so suitable a soil for its growth and propagation as at one time existed.

A case of this disease occurred at a house on Nottingham Road, which was clearly imported.

A boy, 8 years of age, came to a relative here, to escape Scarlet Fever which had attacked his sister at Swadincote. When he had been at Alfreton about seven days Scarlet Fever developed in him, and he was taken to hospital. He had taken the disease before he left home, and had come to Alfreton during the incubative period.

At Swanwick, two children, aged 5 and 2½ years respectively, were removed to hospital with the disease. The house they occupied was very much dilapidated—house walls were damp, stairs out of repair,

the flooring a good deal worn, windows in the pantry wanted renewal, and the rain-spouting was out of repair, and made the foundations of the house very wet and sodden. The house was tenanted by husband wife, and six children, and was of course over-crowded, there being only one bedroom.

There seems to be a scarcity of houses in the district, I am invariably told by the occupants, that they cannot get another house. They say they know very well "they are too thick on the ground", but can't help it, there are no cottages to be had. There are certain cases of over-crowding which I have the greatest difficulty of dealing with. There can be no good in having notices served, if the notice cannot be followed up, and in the absence of more suitable cottages to go to some of these things have to remain.

A case at Alfreton occurred in a boy 14 years of age, who worked at a colliery, the history of which was as follows.

About a month previous to his attack, a young woman in the same house had a sore throat, and was seen twice by her doctor, and treated for a bad cold, and when the boy began to be ill, this young woman, on examination, was found to be "peeling", so that she had evidently had a very mild case of Scarlet Fever, with hardly any visible eruption, and had not been ill enough to prevent her going about the neighbourhood, and working at different places previous to the discovery of this "peeling" stage. I saw her myself, and ordered her to remain strictly in the house for a further period of two weeks.

It ought to be noted here that her doctor had only seen her twice, and no visible symptoms of Scarlet Fever were present, and she herself was not at all unwell, and went about her work as usual.

Another mild case occurred at Riddings, and was distinctly traceable to the patients visit to Nottingham, about a week previously.

A girl, 10 years of age, also at Riddings, took the disease, with no apparent history, but the drainage of the whole block of houses was defective, the back yards needed repairs by way of paving or asphaltting, and the old-fashioned D traps done away with.

A case at Somercotes, of a child 3 years old, came on a visit with the mother, and in two days after her arrival the child was pronounced to have Scarlet Fever. This case was of a mild type, the child showing no signs of illness when it left home with its mother.

At Lea Brooks, a boy 9 years of age, was removed to hospital. The house had no back door, there was an open ash-pit, and an imperfectly protected midden.

### ENTERIC OR TYPHOID FEVER.

Ten cases of this disease were notified during the year in various parts of the district; they seemed to be of a mild type, and no deaths occurred from Typhoid Fever.

A few details are given below of the separate cases, but I failed to get any satisfactory evidence as to the real history of the cases.

I examined samples of the water supply, and the Council have complete accounts of the analysis.

It has been proved that this disease is not simply a water-borne disease. The peculiar Bacillus which is responsible for Enteric or Typhoid Fever, can be conveyed into the human system in a variety of ways.

The domestic fly is a great disseminator of this disease. They walk, rest or feed on specific excreta, or other polluted material, and the specific matter can be conveyed by them on their bodies, legs, heads and wings.

The first case occurred at Swanwick, a little boy, three years of age, had a mild attack of the disease.

No history could be obtained, except that the drains and closets connected with the block of five houses had been opened up and altered, and a pig sty done away with.

While these necessary alterations were going on, the atmosphere whereabouts would become more or less polluted, and it might have had something to do with the disease.

He had been nowhere but at school, and his ordinary diet threw no light upon it.

The drainage from the pig sty used to pass close to the back door of the house.

A man, 25 years of age, had the disease at Birchwood. There were four houses here, with two closets for the use of 17 persons.

The drains in this block had the useless old-fashioned D traps, and one or two were broken. The closets were in a dilapidated state, with the old midden cess-pit, very imperfectly covered with a board or badly-fitting lid.

The staircase leading to the fever patient's bedroom was very damp, the wall being wet from a faulty down spouting.

The thatched roofs of these four houses were faulty, and in one house admitted the rain.

The water supply was from the public main, and the man had not been away from home, and he worked in the neighbourhood, so I came to no definite conclusion as to the history of the case.

A man, 29 years of age, took the disease at Golden Valley.

The case was a mild one, and no history could be obtained; nothing about the premises could account for it. He had been in very indifferent health for some time previously, and he was known to be a drinker of large quantities of water, both at home and abroad.

Two boys, aged 8 and 11 years respectively, had the disease in Raglan Street; no history could be obtained, except the house drains in the block of houses had been stopped up for a whole week, but had been attended to as soon as the owner knew about it.

Inspector Spencer applied the smoke test to the drains, and discovered a defect.

Another case occurred at Sleetmoor Lane, and was removed to hospital. The sanitary condition of the premises was quite satisfactory. The boy was 8 years of age, and had not been from home at all.

At Park Street, Alfreton, two cases of Typhoid occurred at one house. No history could be obtained, the man worked at Alfreton, the house was very clean. The drains were somewhat defective, and there was a nasty deep wet asphalt connected with the closet.

A mild case of the disease occurred at Riddings, a man, 25 years of age; he had suffered a long time with Neuralgia in severe form, which possibly may have so weakened his powers of resistance to disease, as to render him readily susceptible. There was nothing insanitary about the place, except the drains had the useless D traps.

It has been thought that the general absence of dust during the year 1902, has been one means of preventing the spread of disease.

The constant showers during the whole of the summer, kept the soil quite damp, and prevented accumulation of dust, which is a very fertile distributor of disease.

We have only to think for a moment what dust is, manurial products of all sorts dried up by sun-heat, sputa of human beings, and the liquid secretions of all sorts of animals, all mixed up and dried to form dust, blowing about in all directions, some of it being inhaled as we walk the streets, other portions being blown about into the houses, and deposited on all sorts of foods and drink.

The peculiar Microbe of Typhoid Fever can survive a very considerable period in dust, in various kinds of soil.

A leaky cesspool and a filthy midden can breed and propagate the peculiar bacillus if once it obtains access,

Badly paved back yards, where in many cases all sorts of objectional liquids and other material are thrown, and the soil is saturated with filthy breeding grounds for this class of disease.

## PUERPERAL DISEASE.

A married woman was attended by a midwife, and about five days after a doctor was called in. The woman had been somewhat indiscreet on the second day after confinement, and this may have accounted for the Puerperal mischief.

It was one of five houses in a block, and in the absence of ashpits all sorts of household refuse was scattered about the place, and the back yards were in very bad condition, and required re-paving.

The poor woman died about nine days after her confinement. Even presuming these surroundings had nothing to do with the puerperal mischief, yet these loosely-paved yards of porous brick are really nuisances, they are soaked with all sorts of house slops and are never thoroughly dry, and with decomposing changes taking place, according to the changes of weather, the surrounding air becomes polluted, and enters the doors and windows, and renders the inmates susceptible to all kinds of disease.

I am convinced that these back yards ought to be asphalted, or made water-tight with concrete or cemented flooring.

## MEASLES.

This disease prevailed in the latter months of the year at Smercotes, Lea Brooks, Birchwood and Greenhill Lane.

The Smercotes School was closed for one month in consequence of the epidemic.

Eleven deaths were registered as from this disease.

This is a disease which presents considerable difficulty to the sanitarian when he seeks to put in force what are called preventive measures.

The closing of schools is one of the most effectual means of checking its ravages.

Even with such a measure you cannot prevent personal contact. Children will, and of course do get together in large numbers even when schools are closed, but the contact is not nearly so close when out of doors at play, and even then, supposing some of the children are in an infected condition, there is the dilution of the atmosphere, the rapid moving about, and a happy, cheerful state of the child's mind, which is no mean element of protection, and is far better than the close atmosphere of a school room, where in addition to close contact, you have the room charged with a body odour which emanates from persons of children in all forms of more or less uncleanness.

Measles is a disease peculiar to childhood, and one of the results of school closing is, that if we can put off the disease during the period of childhood, say up to five or six years of age, there is less likelihood of the child having the disease at all, and in such cases the often dreadful after-effects of the disease are entirely avoided, and a stronger and more robust vigorous manhood or womanhood is the result.

It is, in many instances, the ignorance of parents who frustrate all efforts to stay its ravages. They believe that every child must have Measles, and that it is best for them to have it, and when a case is near them help the child to get the disease, and are satisfied.

With every year added to the child's life, the tendency to take the disease diminishes.

Measles has the peculiarity, that a child can be in an infectious state before it is possible to diagnose it, hence a school can get highly charged with the disease and only a few children give any evidence of anything but symptoms of a bad cold or a catarrh.

There is no greater risk to children, with this class of disease, than the close mixing up together in the schools and the large classes



## TUBERCULAR DISEASES.

It will be seen that a very large number of children died from this class of disease.

It is to be feared that in many cases it is the result of exposure to cold, insufficient clothing, damp houses and surroundings where the children play about for hours, with an almost total absence of sunlight. It has been well said, "Where the sun doesn't enter the doctor comes."

The growth of many disease-producing microbes and bacteria is retarded, or wholly prevented, by sunshine, it sweetens and disinfects the house and so prevents sickness and disease.

What is now known as the Sanatorium Treatment of Tubercular disease simply means—fresh pure air, sunshine, good food, regulated exercise, and any measures which fortify the general system.

It is now looked upon as an infectious disease, though not exactly in the sense of what we call infectious disease.

When certain members of the family suffer from the disease, it is not necessarily hereditary, but that each have been living subject to the same or similar infective conditions. This induces a certain receptivity, and in these cases the atmosphere is literally charged with the Tubercular microbe, produced by the dried sputa, and the dried-up moisture which charges the air of the room with the constantly produced coughing spray.

Every house where a death occurs from Tubercular Disease should be thoroughly cleansed and disinfected, and wherever a Tuberculous case exists the rooms should be frequently cleansed and purified.

The very acceptance of the doctrine of heredity, takes away the courage of the sufferer, and produces a heavy, sad, darkened, and hopeless condition.

Fortunately statistics amply prove that under certain conditions the disease is amenable to treatment, and the number of its victims is steadily decreasing.

## CANCER.

This is a terrible disease, and the number of cases appears to be on the increase. I am inclined to think the apparent increase in the number is more the result of improved diagnosis.

Large sums of money have been given for science to devote her energies to discover its cause, and its cure.

There seems to be more cases of Cancer of the internal organs, and some have attributed this to imperfect sanitation—a sewage-polluted soil, contamination of drinking water, and any condition which promotes the growth of disease-producing microbes and organisms. The cases of Cancer in the district for 1902 are as follows:—

Alfreton,	Female 62 years,	Cancer of the Uterus
Birchwood,	Male 57 "	" "
Ironville,	Male 61 "	" Pelvis
"	Male 63 "	" Stomach
"	Female 78 "	" Liver
Riddings,	Female 44 "	" Colon
Somercotes,	Male 75 "	" Tongue
Sleetmoor,	Female 80 "	" Liver

## ZYMOTIC DISEASES.

The following are the cases of so-called Zymotic diseases with a fatal termination, for 1902:—

Alfreton,	Female 1 year,	Measles
Birchwood,	Female 11 months,	"
"	" 16 months,	"
"	" 1 year,	"
"	" 6 months,	"
Greenhill Lane, Male	3 years,	"
"	" 8 months,	"
Lea Brooks,	" 2 years,	"
Sleetmoor,	" 5 years,	"
Somercotes,	" 3 years,	"
"	" 16 months,	"

Sleetmoor,	5 years,	"
Alfreton,	Female 18 months,	Whooping Cough
Swanwick,	Male 7 months,	Diarrhoea

The Zymotic Death Rate for Alfreton District is '73 per 1,000

Zymotic Death Rate for England and Wales is 1·64 per 1,000.

## INQUEST CASES.

Alfreton, Male, 48 years,	Natural Causes, Heart Failure.
Birchwood, Male, 56 years,	Killed by Fall of Bind in Colliery.
Cotes Park, Male, 22 years,	Accidentally Drowned whilst Bathing.
Ironville, Male, 16 months,	Accidentally Scalded with Hot Tea.
Ironville, Male, 5 months,	Accidentally Suffocated in Bed.
Riddings, Male, 5 years,	Accidentally Burnt in Night-dress.
Somercotes, Female, 3 weeks,	Accidentally Suffocated in Bed
Swanwick, Male, 25 years,	} Poisoned by Foul Gas in Colliery.
" Male, 18 years,	

## UNCERTIFIED CASES.

These are deaths without any Medical Certificate and are presumed to have died from the causes given.

Alfreton—Male, 27 years,	Syncope.
" —Female, 52 years,	Heart Disease.
Birchwood—Male, 2 hours,	Convulsions.
Pye Bridge—Female, 4 months,	Convulsions.
Lea Brooks—Male, 21 months,	Whooping Cough.
Riddings—Male, 28 years,	Heart Disease.
Sleetmoor—Male, 11 days,	Convulsions.

## ALFRETON.—Causes of Death.

Diseases.	No.
Measles .. .. .	1
Whooping Cough .. .. .	1
Phthisis .. .. .	5
Other Tubercular Diseases .. .. .	4
Cancer .. .. .	1
Bronchitis .. .. .	5
Pneumonia .. .. .	4
Pleurisy .. .. .	1
Brain Disease .. .. .	1
Paralysis .. .. .	1
Convulsions .. .. .	2
Debility .. .. .	2
Peritonitis .. .. .	2
Heart Disease .. .. .	1
Cirrhosis of Liver .. .. .	2
Sarcoma .. .. .	1
Uterine Disease .. .. .	1
Premature Birth .. .. .	3
Old Age .. .. .	5
Child Birth .. .. .	1
Inquest Cases .. .. .	4
Uncertified .. .. .	1

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## BIRCHWOOD.

Measles .. .. .	4
Influenza .. .. .	1
Tubercular Disease .. .. .	1
Cancer .. .. .	1
Pneumonia .. .. .	1
Heart Disease .. .. .	1
Premature Birth .. .. .	2
Old Age .. .. .	1
Uncertified .. .. .	1
Inquest Case .. .. .	1

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## GREENHILL LANE.

Measles .. .. .	3
Influenza .. .. .	1
Tubercular Disease .. .. .	1
Bronchitis .. .. .	3
Pneumonia .. .. .	3
Apoplexy .. .. .	2
Convulsions .. .. .	2
Peritonitis .. .. .	1
Cirrhosis of Liver .. .. .	1
Heart Disease .. .. .	2
Premature Birth .. .. .	4
Child Birth .. .. .	1
Debility .. .. .	3
Uncertified .. .. .	1

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## IRONVILLE.

Phthisis .. .. .	1
Other Tubercular Diseases .. .. .	3
Cancer .. .. .	2
Brain Disease .. .. .	3
Convulsions .. .. .	4
Apoplexy .. .. .	2
Bronchitis .. .. .	2
Pneumonia .. .. .	2
Gastric Catarrh .. .. .	4
Rickets .. .. .	1
Renal Disease .. .. .	1
Debility .. .. .	1
Old Age .. .. .	2
Uncertified .. .. .	1
Inquest Cases .. .. .	2

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## PYE BRIDGE.

Bronchitis .. .. .	1
Apoplexy .. .. .	1
Brain Disease .. .. .	1

3

## RIDDINGS.

Tubercular Diseases .. .. .	2
Cancer .. .. .	1
Brain Disease .. .. .	1
Apoplexy .. .. .	3
Bronchitis .. .. .	2
Pneumonia .. .. .	2
Laryngitis .. .. .	1
Child Birth .. .. .	1
Old Age .. .. .	1
Heart Disease .. .. .	5
Debility .. .. .	2
Inquest Case .. .. .	1
Uncertified .. .. .	1

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## SOMERCOTES AND SLEETMOOR.

Measles .. .. .	3
Phthisis .. .. .	1
Other Tubercular Diseases .. .. .	3
Cancer .. .. .	2
Bronchitis .. .. .	5
Pneumonia .. .. .	5
Brain Disease .. .. .	1
Apoplexy .. .. .	3
Paralysis .. .. .	2
Heart Disease .. .. .	5
Cirrhosis of Liver .. .. .	1
Atrophy of Liver .. .. .	1
Gastritis .. .. .	2
Peritonitis .. .. .	1

Disease of Bowels .. .. .	1
Hernia .. .. .	1*
Sarcoma .. .. .	1
Elephantiasis .. .. .	1
Child Birth .. .. .	1
Debility .. .. .	1
Old Age .. .. .	2
Premature Birth .. .. .	3
Inquest case .. .. .	1
Uncertified .. .. .	1

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## LEA BROOKS.

Measles .. .. .	1
Pneumonia .. .. .	1
Brain Disease .. .. .	1
Apoplexy .. .. .	1
Phlebitis .. .. .	1
Senile Gangrene .. .. .	1
Child Birth .. .. .	1
Premature Birth .. .. .	3
Debility .. .. .	1
Uncertified .. .. .	1

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## SWANWICK.

Tubercular Diseases .. .. .	3
Brain Disease .. .. .	1
Paralysis .. .. .	1
Convulsions .. .. .	2
Bronchitis .. .. .	4
Pneumonia .. .. .	2
Heart Disease .. .. .	2
Enteritis .. .. .	1
Cirrhosis of Liver .. .. .	2
Diabetes .. .. .	1
Premature Birth .. .. .	1
Old Age .. .. .	2
Inquest Cases .. .. .	3

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## DEATHS AT THE VARIOUS AGE PERIODS.

Under 1 year	87	Rate per 1,000, 4 92
1 and under 5 years	27	" " 1.52
5 " 15 "	5	" " .28
15 " 25 "	10	" " .56
25 " 65 "	55	" " 3.11
65 years and upwards	49	" " 2.77
Total	233	

The total Death Rate for Alfreton district, for 1902, is 13.20 per 1,000.

The death rates for the Urban Districts of England and Wales, is 16.3 per 1,000.

48 Per cent. of the deaths in Alfreton District were those of children under 5 years of age.

30 Per cent. of the deaths were those who died between the ages of 15 years and 65 years (which may be called the working period of life).

21 Per cent. died at the age of 65 years, and upwards, and had a mean age at death of 76 years.

37 Per cent. of the deaths were those who died during the first year of their existence.

N.B.—These 37 per centage of deaths are included in the 48 per cent. under 5 years of age.

# NUMBER OF DEATHS IN THE VARIOUS PARTS OF THE DISTRICT:

Locality.	Males.	Females.	Total
Alfreton .. ..	31	18	49
Birchwood .. ..	9	5	14
Greenhill Lane..	15	13	28
Ironville .. ..	18	13	31
Lea Brooks .. ..	9	3	12
Pye Bridge .. ..	1	2	3
Riddings .. ..	9	14	23
Sleetmoor and Somercotes	21	27	48
Swanwick .. ..	19	6	25
Totals	132	101	233

# NUMBER OF BIRTHS IN THE VARIOUS PARTS OF THE DISTRICT.

Locality.	Boys.	Girls.	Total.
Alfreton .. ..	89	75	164
Birchwood .. ..	26	24	50
Greenhill Lane..	28	26	54
Ironville .. ..	31	31	62
Lea Brooks .. ..	22	12	34
Pye Bridge .. ..	7	4	11
Riddings .. ..	25	16	41
Sleetmoor and Somercotes	59	56	115
Swanwick .. ..	36	24	60
Totals	323	268	591

## BIRTHS.—1902.

March Quarter .. ..	..	..	150
June .. ..	..	..	136
September .. ..	..	..	158
December .. ..	..	..	147
Total			591

The Birth Rate for Alfreton district for 1902, is 33.48 per 1,000.

The Birth Rate for England and Wales for 1902, is 28.6 per 1,000.

## DEATHS.—1902.

March Quarter .. ..	..	..	55
June .. ..	..	..	49
September .. ..	..	..	43
December .. ..	..	..	86
Total			233

The Death Rate for Alfreton district for 1902, is 13.20 per 1,000.

The Death Rate for England and Wales for 1902, is 16.3 per 1,000.

## GENERAL SUMMARY OF THE YEAR'S MORTALITY FOR 1902.

Estimated Population ..	17,650.
Measles .. ..	62 per 1,000
Phthisis .. ..	39 ..
Other Tubercular Diseases..	1 01 ..
Bronchitis .. ..	1.75 ..
Pneumonia .. ..	84 ..
Heart Diseases .. ..	90 ..
Inquest Cases .. ..	50 ..
Uncertified .. ..	39 ..
Male Deaths .. ..	7.47 ..
Female Deaths .. ..	5.72 ..

The Zymotic Death Rate for Alfreton District is only .73 per 1,000

The total Death Rate from all Causes for 1902 is 13.20 per 1,000

The average Death Rate for the last ten years, is 15.86 per 1,000.

## INFANTILE MORTALITY.

I have already commented upon the very high rate of Infant Mortality that invariably prevails in the Alfreton district. I give the last three years below:—

1900 .. ..	135.41 per 1,000
1901 .. ..	153.23 ..
1902 .. ..	147.20 ..

Infant Mortality for England and Wales for 1902, is 133 per 1,000.

This rate varies so very much in different parts of England, for instance:

Hertfordshire it is ..	83 per 1,000
Derbyshire .. ..	175 ..
Nottinghamshire .. ..	181 ..

In mining and manufacturing district, and where there is great density of population, it is always very high as compared with agricultural districts, and places with smaller populations.

But there is something wrong in Alfreton district to be 147 per 1,000.

It will be seen that there were actually 15 Premature Births during the year 1902. I can form no idea what the cause of it is.

## SCAVENGING.

The scavenging arrangements seem to be as well carried out as can be expected, seeing that it is done by contract. Of course there is a marked improvement throughout the district, but there will always be complaints while the system is in the hands of 7 separate contractors.

I am quite ready to admit the general activity of the Council, and the great cost of the very many improvements which are carried out throughout the district.

But even the very borders of perfection in the arrangement will not be reached until the Council are able to undertake the work with their own staff of workmen.

I am quite aware of the great difficulties which exist by reason of so many badly constructed ash-pits, most of them being large, and dug very deep below the ground level, and often situate at the end of the cottage gardens and premises, entailing much time and labour before their contents can reach the carts.

I wish portable receptacles could be introduced, it would so very much facilitate the removal of this refuse.

I hope in the plans submitted for new structures, no excavated ash-pits will be allowed; this would gradually help to bring about a better condition of things.

I am aware the Council are spending large sums of money to increase the water supply of the district, and I should like to suggest that when the water supply is ample in quantity, that an effort be made to convert a good many of the pall closets into water closets. This would be one great relief to the scavenging difficulties.

This could be done under Section 30 of the Public Health Act, wherever there may be insufficient closet arrangements.

I believe it has been held that with a special report on each case, and special resolution of the Council relating thereto, that the Court of Summary Jurisdiction cannot go behind such report and resolution.

Of course, at the first, this change would apply to houses of a certain rental, but could then be gradually extended to others.

This measure would have a great bearing on public health.

Take Typhoid Fever for instance. The Medical Officer of Health for Nottingham has just given some valuable statistics upon this point.



It appears to be the case that Nottingham is never free from Typhoid Fever, and there are somewhere about thirty thousand pail closets in that town, and a summary has been given in figures, relative to Typhoid Fever during the last ten years, and the following is the result:

One Typhoid Fever for every 120 houses with pail closets.

One case for every 37 houses with common privies.  
*One Typhoid Fever for every 558 houses with water closets.*

In other words, there were three times as many Typhoid cases in houses with privies as there were with pail closets, and four times as many with pail closets as there were with water closets.

I have always considered pail closets as preferable to privies, but of course they are a long way behind the water closets.

I give these statistics as a strong contribution to the efficacy of water closets.

Of course I am not able to say that the ten cases of Typhoid Fever which occurred in the district last year has any reference to these facts, but I would ask the Council to make a beginning in this direction, when suitable cases come before them.

### THE SEWAGE DISPOSAL.

The old arrangements still continue, and probably the Council do not see their way to make any change, till they are rid of other expensive matters.

The system was thought to be fairly efficient, when it was adopted, but since then, there has been very much improved systems, though "finality" is a long way off at present, and very many authorities are awaiting the report of the Sewage Commission.

### GENERAL INSPECTION.

This, of course, goes on systematically, and I think the Council may congratulate themselves on a very great and beneficial improvement in the general condition of the District.

This report shows a marvellous reduction in the number of Notifications of Infectious Diseases, and the

fact that there has been no death during the year 1902 from any disease which can be looked upon, or considered, "preventible," goes to prove that your Health Officers are active in their work, and giving ample evidence of their official existence.

I have every reason to express, once again, my high opinion of Inspector Spencer, for the way he carries out his share of the work, and the willing readiness with which he assists me, and carries out all my instructions in the way of disease prevention, and all other matters tending in that direction.

I have requested him to give me a short summary of his work for the past year, leaving out, of course, the small details that crop up and are dealt with as they come across our notice while on our inspection.

This will be found at the end of this Report, next to the Tables which are appended.

I think this includes all I need say with reference to the Report for 1902.

I only hope we may be able to reach something like the same results in future years, though we must remember that 1902 has been an exceptionally healthy year, notwithstanding the variable changes of weather which characterised the greater part of the year.

I wish here to thank the Council for the readiness with which they administer the Public Health Act generally, and which is of great assistance to their officers.

I am now in the thirty-first year of my connection with you as Medical Officer of Health, and I trust that I have been, and shall continue to be, worthy of the confidence reposed in me.

I beg, Gentlemen, to subscribe myself, and to remain your obedient servant,

**EDWARD GAYLOR,**

Medical Officer of Health,

ALFRETON URBAN.

BELPER RURAL.

And RIPLEY URBAN DISTRICTS.

Belper,  
 March 3rd, 1903.

TABLE I.—ALFRETON URBAN DISTRICT.  
 VITAL STATISTICS OF WHOLE DISTRICT DURING 1902 AND PREVIOUS YEARS.

Year.	Population estimated to Middle of each year.	Births.		Total Deaths registered in the District.			
		Number.	Rate per 1,000	Under 1 year.		At all ages.	
				Number.	Rate per 1000 births registered	Number.	Rate per 1,000
1892	15522	643	41.42	114	177.29	255	16.60
1893	15704	610	38.84	98	160.65	290	18.45
1894	15880	583	36.71	72	123.49	277	17.24
1895	16178	581	35.91	99	170.39	216	13.24
1896	16385	593	36.19	91	153.45	286	17.05
1897	16703	594	35.56	103	173.40	286	16.87
1898	16911	594	35.13	110	185.18	276	16.61
1899	17181	558	32.48	98	175.62	286	16.22
1900	17418	576	33.06	78	135.42	288	16.03
1901	17560	633	36.04	97	153.23	241	13.72
<b>Averages for years 1892-1901</b>	<b>16544</b>	<b>596</b>	<b>36.13</b>	<b>95</b>	<b>160.81</b>	<b>270</b>	<b>16.20</b>
<b>1902</b>	<b>17650</b>	<b>591</b>	<b>33.48</b>	<b>87</b>	<b>147.20</b>	<b>233</b>	<b>13.20</b>

Area of District in acres (exclusive of area covered with water) 4,625.

Total population at all ages, 17,560

Number of inhabited houses, 3,515

Average number of persons per house 4.71

} At Census of 1901.

TABLE II.—ALFRETON URBAN DISTRICT.

Cases of Infectious Disease, notified during the year 1902.

Diseases Notified.	At all ages	Under 1 year	1 & under 5 years	5 & under 15 years	15 & under 25 years	25 & under 65 years
Diphtheria .. ..	—	—	—	—	—	—
Scarlet Fever .. ..	19	1	6	10	2	—
Typhoid Fever .. ..	10	—	2	4	1	3
Puerperal Fever .. ..	2	—	—	—	—	2
Erysipelas .. ..	14	—	—	—	4	10
	45	1	8	14	7	15

## TOTAL CASES NOTIFIED IN EACH LOCALITY.

Localities.	At all ages	Scarlet Fever	Typhoid Fever	Puerperal Fever	Erysipelas
Alfreton .. ..	15	4	4	2	5
Birchwood .. ..	2	—	1	—	1
Greenhill Lane .. ..	5	3	2	—	—
Ironville .. ..	4	1	1	—	2
Lea Brooks .. ..	3	3	—	—	—
Pye Bridge .. ..	—	—	—	—	—
Riddings .. ..	5	3	—	—	2
Sleetmoor and Somercotes .. ..	7	2	1	—	4
Swanwick .. ..	4	3	1	—	—
Total	45	19	10	2	14

## CASES REMOVED TO HOSPITAL.

Localities.	Scarlet Fever.	Typhoid Fever.
Alfreton .. ..	3	—
Lea Brooks .. ..	2	—
Riddings .. ..	1	—
Sleetmoor .. ..	—	1
Swanwick .. ..	2	—
Total	8	1

## NOTIFICATIONS

Received in separate Months of 1902.

January .. ..	7
February .. ..	5
March .. ..	1
April .. ..	4
May .. ..	8
June .. ..	6
July .. ..	3
August .. ..	3
September .. ..	1
October .. ..	4
November .. ..	1
December .. ..	2
Total	45

TABLE IV.—ALFRETON URBAN DISTRICT.

Causes of, and ages at, Death, during year 1902.

Causes of Death.	At all ages	Under 1 year	1 and under 5	5 and under 15	15 and under 25	25 and under 65	65 and upwards
Measles .. ..	11	5	6	—	—	—	—
Whooping Cough .. ..	1	—	1	—	—	—	—
Diarrhoea .. ..	1	—	—	—	—	1	—
Enteritis .. ..	3	3	—	1	—	—	—
Phthisis .. ..	7	—	—	—	2	3	2
Other Tubercular Diseases .. ..	18	15	1	—	1	1	—
Cancer .. ..	8	—	—	—	—	4	4
Bronchitis .. ..	31	18	3	—	1	3	7
Pneumonia .. ..	15	6	2	—	—	5	2
Pleurisy .. ..	2	—	—	—	—	—	2
Alcoholism, Cirrhosis of Liver .. ..	6	—	—	—	—	5	1
Premature Birth .. ..	15	15	—	—	—	—	—
Diseases and Accidents of Parturition .. ..	6	—	—	—	2	4	—
Heart Disease .. ..	16	—	—	1	2	4	9
Accidents .. ..	8	2	1	1	2	2	—
Uncertified .. ..	7	4	1	—	—	2	—
Other Diseases not classified .. ..	76	19	12	2	1	20	22
From all causes .. ..	233	87	27	5	10	55	49

# REPORT OF THE INSPECTOR OF NUISANCES.

COUNCIL OFFICES,

ALFRETON.

FEBRUARY 18TH, 1903.

DEAR SIR,

The following is a summary of the work done in the Public Health department during the year 1902.

Ten thousand one hundred and fifty-nine Loads of Refuse have been removed by the Scavengers.

I have made 4,100 Inspections of Privies and Ash-pits, and served 651 Notices and 24 Letters to the scavengers to empty privies and ashpits, and no less than 800 have been emptied after my notices.

For the repair of these structures, and conversion of old insanitary privies, 63 Legal and other Notices have been served, 110 Old Insanitary Privies have been converted into Pan Closets, with the result that 110 Nuisances have been abated.

10 Notices have been served to create additional Pan Closets. One Old Privy has been converted into a Water Closet. 24 Notices have been served to construct Ashpits, with the result that 31 New Ashpits have been built.

1,006 Inspections of Drains have been made, and 87 Notices have been served with reference to repairs, re-construction and cleaning out of drains.

100 Inspections of defective Stench Traps have been made, 50 Notices served for Gully Traps, and 52 new Gully Traps fixed in lieu of old Bell and useless D Traps.

There have been—

500	Inspections of Pigstyes.
35	" Cow Sheds.
100	" Water Closets.
81	" Slaughter Houses.
42	" Infected Houses and Houses Disinfected.
232	" Work in progress.
10	" Houses Overcrowded.
60	" Houses requiring repairs.
9	" Urinals.
14	" Eave Spouts.
100	" Waste Pipes.
50	Backyards Examined and notices served.

About 150 Notices have been served dealing with the above inspections, independent of scavenging and drainage, and over 200 Nuisances have been abated. 34 Articles of Bedding were sent to the Joint Hospital to be disinfected.

11 Samples of Water were collected for Analysis.

119lbs. of Beef were taken and destroyed. The butcher paid £2 expenses, after soliciting the Council not to take proceedings against him.

12 Samples of Milk were collected for analysis, in co-operation with the County Sanitary Inspector. One of the samples was deficient of 10 per cent. of its natural fat. The seller was fined £1 and costs.

126 Inspections of Workshops have been made, 18 formal notices given for limewashing, and two notices for overcrowding.

I remain,

Your obedient servant,

J. SPENCER.

Dr. Gaylor, M.O.H.,  
Belper.

